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HEALTH AND HUMAN SECURITY

CONTENTS

1.   INTRODUCTION

During the Cold War the focus of security was on national security—the security of the state, primarily from a military perspective. This focus is no longer appropriate in the post-Cold War world of the 21st century, which is characterized by growing complexity, rapid change, increasing global interdependence and mutual vulnerability to a wide range of threats. These factors create uncertainty and insecurity for individuals and communities around the world. If we compare today's world economy with the system that emerged in 1949 at Bretton Woods, what is most striking is the profound restructuring that it has undergone since then. Globalization, interdependence, skewness, dynamism and fragility are appropriate words to characterize this restructuring. [*1*]

Causes of growing insecurity include: extreme and increasing economic polarization, between and within North and South; the emergence of new diseases and the re-emergence of old ones; a change in the nature of conflicts from inter-state to intra-state; a change in the nature of the weapons that are central to those conflicts, from weapons of mass destruction to small arms; and a change in the nature of victims of war, from soldiers to civilians. New environmental challenges, such as global warming, can result in health and geo-political outcomes, such as new threats related to infectious diseases, large population migrations and refugees, and access and availability of water, which, when combined with situations in which there is access to or availability of weapons, can result in a high level of human insecurity, nationally and internationally. [2] While well positioned countries, groups and sectors have benefited greatly from the globalization process, many others that are more vulnerable have witnessed alarming decline in their well-being, in a manner that in some cases threatens their very survival and security. Overall, the growing insecurity is not adequately addressed by the traditional mechanisms that are used in pursuit of national security.

The continued effects of these factors (post-Cold War realities, globalization, changes in the concept of security, along with the emergence of new diseases and forms of violence) on stability and human development throughout the world, but especially in less economically developed countries, have warranted serious attention to the concept of human security. This approach has at its centre the needs of people, as individuals and in small groups. These needs differ from the concerns of states. The security of a state, at least in the short term, does not depend upon the security of individual people in that state. By contrast, the security of people depends not only upon the security of the state, but also upon a variety of factors, some of which are beyond the control of a particular state. Ultimately, the security of people requires a global approach.

The new approach has been termed "human security". Human security has been discussed globally as a universal need: no one can be fully secure unless all people enjoy at least some minimal level of security. Moreover, it is in our shared interest to confront our common threats in a collaborative manner.

The very concepts of comprehensive human security including health security are deeply rooted in the culture of the Eastern Mediterranean Region. Anyone who reads the biography of the Prophet Muhammad ﷺ cannot fail to note that his first actions on having

settled in Medina were aimed at providing the newly established community with its basic needs for survival. The first priority among all these needs was security. Indeed, if the condition of security of any community is not met, no other needs can be met and no progress can be made. The Quran makes the importance of security very clear, telling us of the supplication of the Prophet Abraham as he was building the Kaaba in Mecca, which included this beautiful prayer: *My Lord, make this a secure land, and bestow plenty on its people.* (2:126) The Quran also tells us *the Prophet Joseph said to his parents and brothers: Enter Egypt. If God so wills, you shall be secured.* (12:99) God also reminds the Arabian tribe of Quraish of His great bounty: *Have we not established for them a sanitary of safety to which fruits of every kind are brought as a provision from Us.* (28:57) God tells the Quraish: *Let them worship the Lord of this House, who provides them with food lest they should go hungry, and with security lest they should live in fear.* (112:304) The Prophet 鑾 said: "He of you who finds himself enjoying good health, secure in his community, and has his daily sustenance is as if he had the whole world at this finger tips". Because of the great importance of security to any community, the Prophet 鑾 established the bond of brotherhood between those of his companions who had migrated from Mecca (the *muhajireen*) and those who were natives of Medina (the *ansar*). [3] The Prophet's 鑾 emphasis that health security is an integral component of human security remains relevant to this day.

The WHO constitution clearly defined the right to health and its contribution to overall peace and security in the following two principles.

• The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

• The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest cooperation of individuals and States.

2. THE CONCEPT OF HUMAN SECURITY

The concept of human security became widely known through the Human Development Reports published by the United Nations Development Programme (UNDP) in 1993 and 1994. The 1994 report is said to be the first document to provide a comprehensive definition of human security. It introduced the term human security as a people-centered, universal framework having seven interconnected components: economic security (assured basic income); food security (physical and economic access to food); health security (relative freedom from disease and infection); environmental security (access to sanitary water supply, clean air and a non-degraded land system); personal security (security from physical violence and threats); community security (security of cultural identity); and political security (protection of basic human rights and freedoms). The preventive aspect of human security was emphasized, and a distinction was drawn between human development—which is about widening people's economic choices—and human security—which is about people being able to exercise these choices safely and freely. [4]

A comprehensive analysis of human security and mutual vulnerability is provided by Nef, who emphasizes the concept of mutual vulnerability: that in an increasingly interdependent world, global security is only as strong as the weakest link in the chain. He states: "There is urgent need to develop analytical frameworks to understand this seemingly random, turbulent, and chaotic period and the emerging global configurations. We also need to develop operational criteria and mechanisms for conflict management, based on this understanding."

Nef elaborates five dimensions of human security: The first dimension is environmental, personal, and physical security, which means the right of individuals and communities to preservation of their life and health and to dwell in a safe and sustainable environment. The second dimension is economic security which addresses access to the employment and resources needed to maintain one's existence, reduce scarcity, and improve the material quality of life in the community. The third dimension is social security, which emphasizes freedom from discrimination based on age, gender, ethnicity, or social status. This implies access to safety nets, knowledge, and information, as well as an ability to associate. The fourth dimension is political security, which ensures the right to representation, autonomy (freedom), participation and dissent, combined with empowerment to make choices with a reasonable probability of effecting change. This includes legal and juridical security: individual and collective access to justice and protection from abuse. The fifth dimension is cultural security, which includes the set of psychological orientations of society geared to preserving and enhancing the ability to control uncertainty and fear. [1]

The UNDP definition has not been universally employed, as illustrated by the differing interpretations of human security that have been used by the governments of Canada and Japan. Both countries are important supporters of human security initiatives. Canada has described its position as follows.

> A wide range of old and new threats can be considered challenges to human security; these range from epidemic diseases to natural disasters, from environmental change to economic upheavals. Through its foreign policy, Canada has chosen to focus its human security agenda on promoting safety for people by protecting them from threats of violence. We have chosen this focus because we believe this is where the concept of human security has the greatest value added—where it complements existing international agendas already focused on promoting national security, human rights and human development. [5]

Japan has adopted a broader focus for its work on human security, based on an interpretation somewhat like that of UNDP. The Japanese position has been described as follows:

> Japan emphasizes "Human Security" from the perspective of strengthening efforts to cope with threats to human lives, livelihoods and dignity [such] as poverty, environmental degradation, illicit drugs, transnational organized crime, infectious diseases such as HIV/AIDS, the outflow of refugees and anti-personnel land mines, and has taken various initiatives in this context. [6]

To some extent, differing views on human security reflect differing views on related issues of international policy. For example, the personal-security domain of human security is linked to the potentially controversial issue of "humanitarian intervention" in the affairs of states. However, differing perceptions of the utility or "valued added" of human security also play a powerful role in influencing the decision of an actor—such as a government—to emphasize one or another domain of human security. [7]

Human security is, therefore, a people-centered approach based upon the economic, political, physical and social well-being of people. A human security approach addresses the basic causes of insecurity. Thus, human security is rooted in the freedom of people from fear and want. Freedom from fear implies safety from violence and violations of human rights; freedom from want implies at least a minimal level of health, diet and income. Violent conflict is a significant cause of insecurity, and the basic causes of conflict, including injustice and inequity, need to be appreciated. Poverty and insecurity are linked in a vicious circle. Therefore, promoting human security is intimately connected with the promotion of human development. Moreover, human security concepts can only be effectively implemented if they are sensitive to socio-cultural values.

Human security must, if it is to be a useful concept, bring added value to pre-existing programmes. This can occur in at least four ways. First, human security can provide a clear and compelling objective for humanitarian work. Second, human security has a preventive aspect, which can stimulate forward-looking contingency planning. Third, human security emphasized global interdependence, and can therefore mobilize additional resources and new partnerships. Fourth, human security addresses interacting threats in multiple domains, and can therefore stimulate holistic, comprehensive threat assessment and programme planning.

The Commission on Human Security was established in 2001 as an independent commission of 12 prominent individuals. The Commission is co-chaired by Sadako Ogata, former UN High Commissioner for Refugees, and Amartya Sen, Nobel Laureate and Master of Trinity College, Cambridge. The Commission endeavours to: (1) promote public understanding, engagement and support of human security and its underlying imperatives; (2) develop the concept of human security as an operational tool for policy formulation and implementation; and (3) propose a concrete programme of action to address critical and pervasive threats to human security. The Commission approaches its work through two broad areas; human insecurities resulting from conflict and violence; and links between human security and development. The Commission is scheduled to publish a report of its findings in 2003.

From the regional perspective it is important to emphasize the values of equity and justice both at national and international level to ensure successful realization of human security at country level. Several reports from countries, regional and global sources show the serious socioeconomic gap between various sectors of the community. Inequality can weaken the social community, including the feeling of responsibility towards public goals, and increase crimes and violence. This will be reflected in social insecurity. Inequality can also lead to concentration of income in the top segment of society. This will undermine the

establishment of a strong social system due to the absence of a middle class that demands an accountable economic system.

Table 1 shows that while the gaps between the richest and poorest sectors are widening in term of exchange rate, this is not the case if we compare the gap in terms of purchasing power parity.

Table 1. Income inequality between the worlds richest and poorest, based on country averages, 1970 and 1997

Measure	Richest 10% to poorest 10%		Richest 20% to poorest 20%	
	1970	1997	1970	1997
Exchange rate	51.1	127.7	33.7	70.4
Purchasing power parity	19.4	26.9	14.9	13.1

Source: [8]

Inequality between and within countries has a significant contribution to human insecurity.

Justice is another important determinant of human security. The strong feeling of human insecurity in several countries of the Region is greatly attributable to injustice. In the occupied territory of Palestine, for example, the occupiers ignore the simplest and most basic of human rights, even those relating to the right of individuals to obtain their daily needs in order to sustain themselves, and their right to obtain emergency health care and first aid.

Several studies have also indicated that sanctions imposed on some countries has resulted in serious deterioration of the socioeconomic and health situation of people living in these countries, particularly vulnerable groups. The indiscriminate imposition of sanctions has deepened the feeling of injustice and human insecurity.

The concept of human security should therefore take the two determinants of inequality and justice into consideration in developing any concrete programme to address threats to human security.

3. HEALTH SECURITY

Health has been recognized in most constitutional documents as a human right. This commitment needs to be put into action. The commitment to this right depends on the value assigned to health by individuals, states and the international community. It should also be a determining factor in the way states allocate resources to development priorities. However, the compelling force of the commitment has not found concrete expression in national or global policy. The right to health was not adequately translated into special claims on available resources, nor did health status become the test of social and economic development. Although article 12 of the International Covenant on Economic, Social and

Cultural Rights recognizes "the right of everyone to the enjoyment of the highest attainable standard of physical and mental health", the implementation of this right has remained essentially an ideal. It is, therefore, important to give the right to health an operational dimension. Another, more practical, definition of the right to health is the right to the conditions that enable individuals to attain and enjoy their full potential for a healthy life.

Equity of access to health care should be one of the main policy goals. Every national health system should ensure universal access to adequate quality care and avoid unfair and unjustified discrimination between individuals, groups and communities. The striving for equity in access to health care must be a fundamental objective of the process of health sector reform.

The situation of children in Iraq under the ongoing imposed sanctions is another striking case of the effects of political situations on health security. Based on UNICEF figures, "an estimate of 4500 Iraqi children below the age of 5 are prone to die monthly of hunger and malnutrition due to the decrement in the health budget allocation by 90%–95% compared to 1987." The sanctions have also resulted in an increase in infant mortality from 47 out of 1000 live births in 1984–1986 to 108 in 1994–1998, and in mortality rate among children below the age of 5 from 56 to 131 for every 1000 during the same period. [9]

The Regional Health for All Policy and Strategy for the 21st Century emphasized the importance of commitment to HFA goals [10]:

1. It is essential to renew national commitment to the principles of health for all not only at national level, but also at regional and global levels. This commitment should be translated into action aiming at making the spirit of health for all and the quest for equity and other values so deeply rooted in the national socioeconomic development process that they will be sustained.

2. It is essential to emphasize that sustainable health is the focus of socioeconomic development. This means that:

•   Each society should identify and define its own profile of vulnerability using health status as a key indicator;

•   Development strategies should act on the integral links between health status and economic well-being and productivity, especially in the case of highly vulnerable groups;

•   Health-related knowledge should become accessible to people in a form that increases their health self-reliance and their capacity to manage and cope with a rapidly changing health environment; and

•   Health-promoting activities should be linked to investments, to income-generating activities and to economic enterprise.

If these principles—the right to health and equitable access to health care—were translated into action within a truly sustainable health system, we would be able to ensure health security and contribute to human security.

4. HEALTH AND HUMAN SECURITY

Health is an essential component of human development and individual well-being and this is increasingly recognized at the global level. Indeed it constitutes a basic development need if people are to attain an optimal quality of life. At the same time, human development and individual well-being cannot be achieved if people are not sufficiently protected against threats and do not themselves feel safe. Health security, human security, and human rights are therefore closely interconnected.

The role of health in human security was emphasized in a laudatory message sent by the UN Secretary-General, Kofi Annan, to the Consultation on Health and Human Security, organized by the Regional Office, as illustrated by the following excerpt:

Health is one of the key building blocks of society. It is essential for economic growth, poverty reduction and social justice. It is a prerequisite for hope...

We live in an age when the separation between national and international on the issue of health agendas no longer works and no longer exists. There is no dividing line between "foreign" and "domestic" infections. We know that poverty lies at the root of many ills, and that ill health in its turn has a devastating effect on the economies of developing countries. If we are going to break this vicious circle, and ensure human security for all the world's people, we will have to make a major investment in public health in the developing world. [11]

Operationalizing a human security approach can add value to pre-existing health strategies and programmes by mobilizing new resources and partnerships and by linking health programmes with programmes that address related objectives. Practical programmes that are guided by the concept of human security will generally continue a pre-existing strand of activity. This will certainly be true in the health sector in which there is a rich body of experience and active planning of new programmes. A notable example of current planning is the action agenda that has been set forth by the Commission on Macroeconomics and Health (CMH). This action agenda, which complements the Millennium Development Goals, focuses on the health needs of the general population in low-income countries and the poor in middle-income countries. The concept of human security can bring added value to the CMH action agenda and assist the attainment of the Millennium Development Goals, in at least three ways. First, the human security perspective can be used to mobilize new resources. Second, the human security perspective can catalyse new partnerships that recognize global interdependence; the linked threats of infectious disease and forced population movement provide one context for such partnerships, while the similarly linked threats of infectious disease and bioterrorism provide another context. Third, the human security perspective can

link different programmes that address related objectives—such as the prevention of violent conflict—and can thereby enhance the effectiveness of both strands of effort. [11]

The basic development needs (BDN) initiative of the Regional Office for the Eastern Mediterranean can contribute to promotion of health and human security. This initiative is a comprehensive approach addressing overall local development in order to achieve better quality of life. BDN has established itself, after several years of promotion of the concept, as one of the main regional approaches to integrated community development and self-reliance. During the past decade, the concept of BDN has been advocated in several countries as an approach that, while mainly addressing poverty alleviation, also directly and indirectly affects the health status of the people. The BDN initiative entails political commitment, community organization, motivation and involvement, intersectoral action, and integrated, decentralized, comprehensive development.

Basic development needs initiatives include community-identified projects that integrate social, economic, health and environmental issues. BDN projects are organized and managed by the community, supported by a coordinated intersectoral team, including health-related sectors such as education, water supply, agriculture and housing. Development projects are implemented in partnership with the local population and nongovernmental organizations. BDN projects target income generation and poverty alleviation by implementing realistic, achievable activities, which have to include a "basic" health component.

Almost all countries with BDN programmes have included income-generating schemes in their plans. These income-generating schemes could provide an important source, in the long term, to sustain and expand BDN and, thus, health for all. The community-centred, project-specific and comprehensive BDN initiative has immense potential to appropriately address the differing health needs of rural, peri-urban and urban communities of Eastern Mediterranean Region countries. BDN, therefore, strongly complements and supports other health promotion and prevention activities being undertaken within the primary health care delivery system.

5. REGIONAL CONSULTATION ON HEALTH AND HUMAN SECURITY

Following the Regional Committee resolution EM/RC48/R.2, the Regional Office organized a Consultation on Health and Human Security, in Cairo, from 15 to 17 April 2002.

The Consultation's objectives were:

- To arrive at a common understanding of human security.

- To build consensus on the relationship of health to human security.

- To identify the health and human security issues relevant to the participants in the consultation.

- To propose a working agenda on applications of health and human security strategies.

- To propose a plan to disseminate and operationalize the consensus of the consultation and its follow-up.

The main outcomes of this consultation were reflected in the Cairo Statement on Health and Human Security. (Annex 1)

Health and human security were further discussed at the twenty-sixth meeting of the Regional Consultative Committee, which recommended that:

1.   Governments should endorse the Cairo Statement and the recommendations on health and human security.

2.   Countries should distribute the Cairo Statement and background documents to national and regional academic institutions and invite experts to contribute to the debate and the development of a health and human security approach.

3.   The Regional Office should assist Member States in conducting studies on the effects of globalization on human security.

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Annex 1

CAIRO STATEMENT ON HEALTH AND HUMAN SECURITY
17 April 2002

Preamble

We, the participants in the Consultation on Health and Human Security, organized by WHO Regional Office for the Eastern Mediterranean and co-sponsored by WHO, UNFPA and UNAIDS, held in Cairo, 15–17 April 2002, state the following:

We share the view that the human security approach is a vision for development in the 21st century. We agree that human security constitutes a set of conditions for global and local human development that focuses on the aspirations and well-being of people, ensuring them a living environment free from threats, in which their essential basic needs are met with dignity and with respect for their rights. Accordingly, we subscribe to the following statement by UN Secretary-General Kofi Annan:

> In an increasingly interdependent world, nations and peoples must think afresh about how we manage our joint activities, advance our shared interests, and confront our common threats. No shift in the way we think or act is more critical than that of putting people at the centre of everything we do. That is the essence of human security. That is something that all people—in rich and poor countries alike, in civil society or the precincts of officialdom—can agree on. And it is something that, with political will, can be placed at the heart of the work of the UN— our work is to create security where it has been lost, where it is under threat, or where it has never existed.[1]

We believe that human security concepts can only be effectively implemented if they are sensitive to sociocultural values.

We acknowledge that the tremendous human costs of emerging and re-emerging diseases, environmental degradation, gender-based and other forms of violence, famine, all forms of discrimination, and recurrent social strife and territorial occupations, illustrate the centrality of health issues to the realization of human security.

We understand that the human security approach is a response to rapid and increasingly complex human development, which, in shaping the modern world, can create insecurity and which calls for new development tools. Moreover, the human security approach recognizes the mutual vulnerability and interdependence that characterize the modern world.

We welcome the Report of the WHO Commission on Macroeconomics and Health, which confirmed the direct links between investments in health, enhanced economic development and strengthened human security. We believe that improving the health of the poor is a prerequisite for safeguarding

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[1] From the Foreword to: McRae R, Hubert D. Eds. *Human security and the new diplomacy: protecting people, promoting peace.* Montreal: McGill-Queen's University Press, 2001.

human security and fulfilling the world's commitment embodied in the Millennium Development Goals.

We believe that public health, which involves a people-centred, comprehensive approach that offers a unifying perspective, provides a unique opportunity for both deeper understanding and implementation of human security. Conversely, human security offers a new opportunity to operationalize the definition of public health within a context of rights-based development.

We recognize that, to translate health and human security concepts into action, the following principles must be adhered to:

- Sustainable health systems
- Equitable access to prevention and care
- Attention to the special needs of men, women and children
- Special attention to vulnerable populations
- Compliance with ethical standards
- Active participation of all interested parties, including the providers and beneficiaries of services
- Community and national solidarity and people-centred activities
- International solidarity
- Respect for fundamental human rights
- Compliance with international conventions

We commend those who are already supporting people-centred, comprehensive development.

Recommendations

We recommend:

1. The development of initiatives, based on agreed-upon criteria, in the form of pilot projects to demonstrate the added value of a health and human security approach. Potential initiatives include:

- The Morocco regional project of the "Observatoire national des droits de l'enfant" on health, human security and rights of children.

- Victim assistance as a multisectoral project in Afghanistan, as recommended by the Standing Committee on Victim Assistance of the Mine Ban Treaty.

- Multisectoral intervention using HIV/AIDS in Djibouti and the Eastern Mediterranean Region, as an entry point for health and human security.

Additional initiatives should be encouraged from the field.

2. The implementation, by countries in the Eastern Mediterranean Region, of community-based interventions with the support of international organizations (e.g. through WHO's Basic

Development Needs approach), as possible models for enhancing and addressing health and human security needs.

3. Further work on public health preparedness at community and country levels, to respond to the threat of emerging and re-emerging infectious diseases, whether naturally, accidentally or deliberately caused.

4. Development of an academic network to study and promote the health and human security concept.

5. Development of the human security approach through a strategy in which local activities are planned according to experimental modalities, previously available resources are re-oriented, and strong links are established between national and local levels and between the academic network and field programmes.

6. The adaptation of pre-existing plans and programmes, so as to be consistent with a human security approach, through formal and continuing training of professionals and decision-makers; this could be accomplished through partnerships among different agencies and actors, at local, national and international levels.

7. Strengthening of links between the League of Arab States, WHO and the co-sponsoring agencies, particularly in the field of training.

8. Research on issues such as: the impact of sanctions on health; the impact of globalization on health; and the development of methods for analysis and evaluation of the interaction between health and human security. The latter area of research should include the identification of indicators and the validation of theoretical concepts through field experience.

9. Establishment of an international network on health and human security, which would emphasize public health and would involve participants from the public and private sectors and from relevant institutions.

10. The establishment of advisory mechanisms to accompany the follow-up to the above-stated recommendations.

Invitations and Requests

We invite governments, international agencies and local organizations to include a health and human security perspective in their development policies and strategies.

We request that the findings of this consultation, including this statement, be sent to WHO, UNFPA and UNAIDS, and to other UN and international organizations, for their consideration and endorsement.

Furthermore, in line with the endorsement by the WHO Regional Committee for the Eastern Mediterranean at its Forty-eighth Session in October 2001 of activities relating to health and human security, we call for the wide dissemination of the findings of this consultation, including this statement, to all regional partners and other interested parties.